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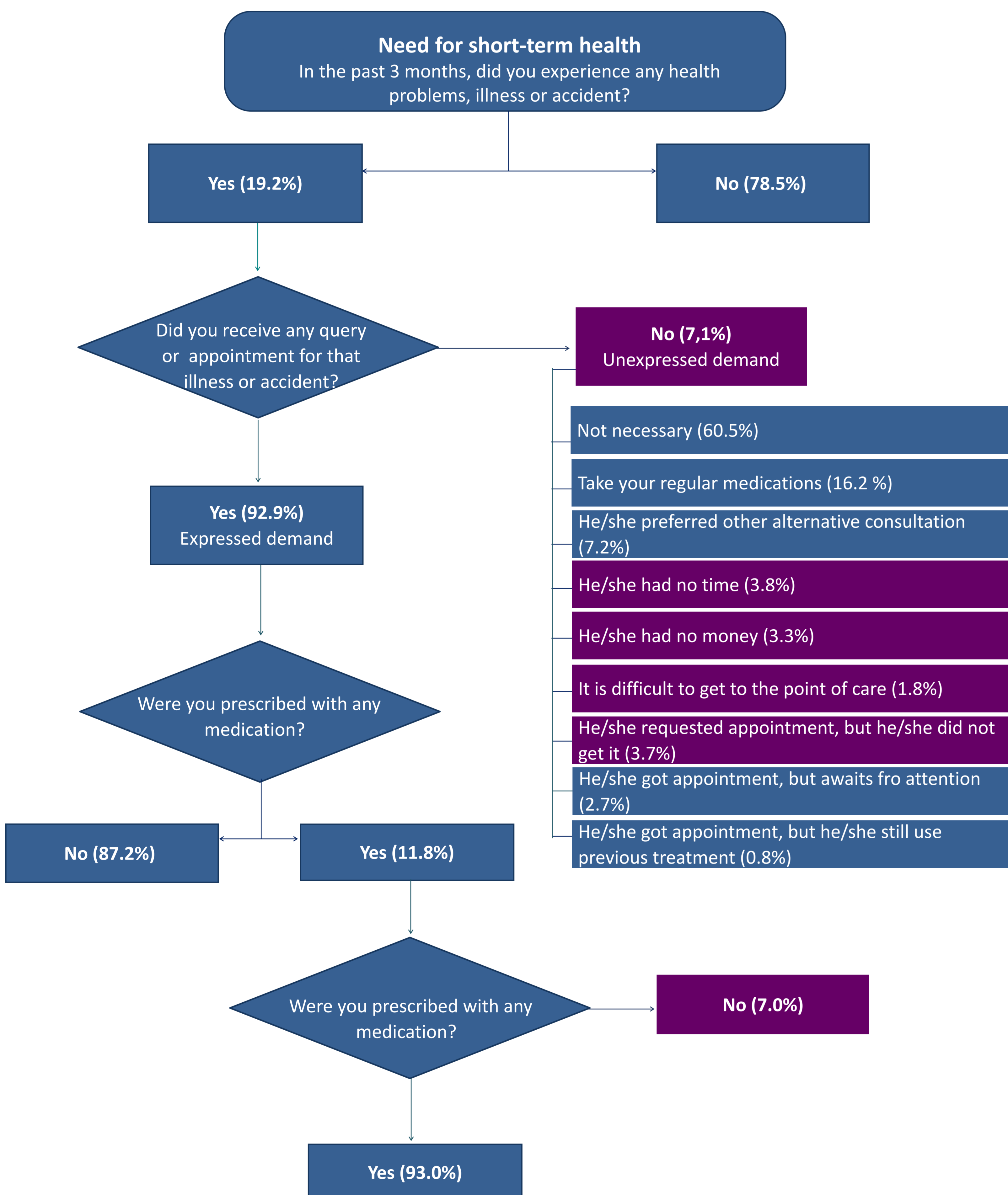
### Objective

Within the social protection in health framework, effective use of healthcare is a crucial indicator of universal coverage. The objective of this study was to assess differences in effective use of short-term (any self-reported health problem or accident 3 months prior to survey) healthcare between international migrants and the local Chilean population.

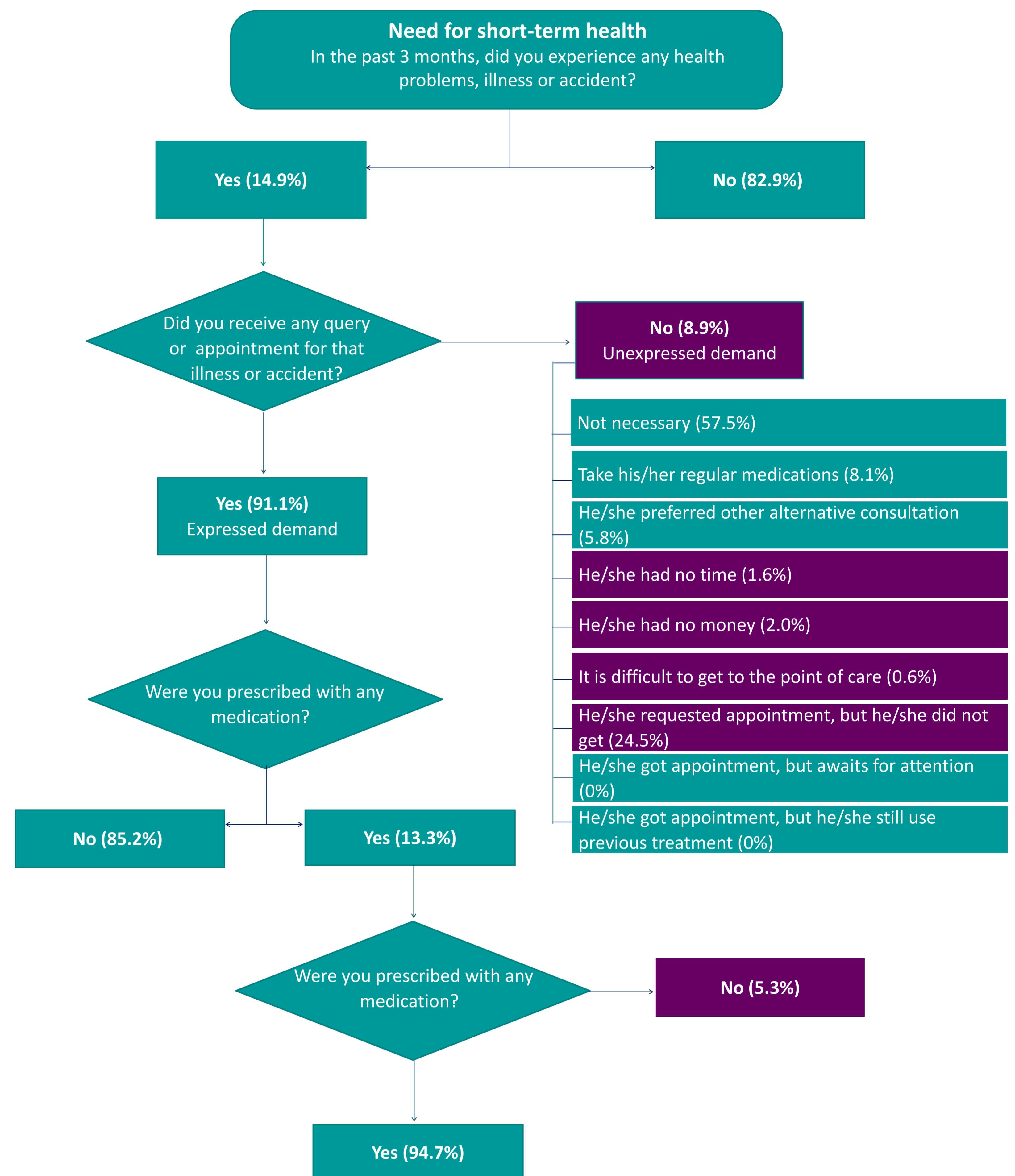
### Methods

Exploratory secondary analysis of nationally representative, anonymous Chilean survey CASEN 2013 (n=218 491 participants belonging to 66,725 households). We divided the sample into self-reported immigrants (n=3,555) and Chilean-born (n=212,346). We did not include in the analysis those who preferred not to report their migration status (missing values n=2,590). We estimated self-reported short-term (i) healthcare need, (ii) healthcare use, and (iii) received treatment; for both populations. Analysis was conducted in STATA 13.

#### Demand and effective use of health care for short-term needs in Chilean population. CASEN 2013.



#### Demand and effective use of health care for short-term needs in immigrant population. CASEN 2013.



		Medical care		Rate of medical care
		Yes n%	No n%	
Health insurance	Public system	32.417	70,2%	90,4
	Private system	10.810	23,4%	98,7
	Without health prevision	1.309	2,8%	59,7
	Other	1.312	2,8%	98,4
	Unresponsive	350	0,8%	96,7
Sex	Male	15.601	33,8%	94,2
	Female	30.597	66,2%	89,6
Educational level	Without formal education	1.680	3,6%	95,9
	Primary	8.672	18,8%	90,9
	Secondary	17.789	38,5%	91,2
	Superior (Technique)	4.100	8,9%	91,6
	Professional	12.402	26,8%	94,3
	Post grade incomplete	336	0,7%	64,5
	Post grade complete	1.088	2,4%	67,4
Occupation	Unresponsive	131	0,3%	100
	Occupied	28.295	68,9%	91,5
	Unoccupied	1.308	3,2%	74,7
	Inactive	11.477	27,9%	90,2
Zone	Urban	44.286	95,9%	91,3
	Rural	1.912	4,1%	86,7

### Results

8.5% of immigrants reported not having any health insurance in Chile (versus 2.5% of the Chilean-born). Of these, most are male or between 0-14 years-old. Regarding short-term healthcare, 14.9% of immigrants reported having any health problem/accident in past 3 months (versus 19.2% in Chilean-born). Of these, 91.1% asked for a healthcare (versus 92.9% in Chilean-born) and 13.3% received treatment (versus 11.8% in Chilean-born). However, of those immigrants who requested healthcare, 23.7% did not receive any attention (versus 3.7% in the Chilean-born), most of them not entitled to any healthcare provision in the country.

### Conclusions

Our analysis suggests significant differences in effective use of healthcare for short-term health problems/accidents in international migrants compared to the Chilean-born, particularly among immigrants without healthcare provision. This unique evidence supports of the need promoting social protection of health for all population in Chile, including foreigners in need for healthcare.

		Medical care		Rate of medical care
		Yes n%	No n%	
Health insurance	Public system	2.350.187	80,40%	92,7
	Private system	398.489	13,60%	94,7
	Without health prevision	36.768	1,30%	79
	Other	105.162	3,60%	96,5
	Unresponsive	33.676	1,20%	92,4
Sex	Male	1.188.897	40,70%	92,2
	Female	1.735.385	59,30%	93,3
Educational level	Without formal education	411.410	14,10%	95,1
	Primary	942.216	32,20%	92,3
	Secondary	1.011.752	34,60%	92,6
	Superior (Technique)	196.216	6,70%	92,8
	Professional	326.732	11,20%	92,5
	Post grade incomplete	7.289	0,20%	92,1
	Post grade complete	19.451	0,70%	96,5
Occupation	Unresponsive	9.216	0,30%	95,1
	Occupied	1.089.161	47,30%	91,6
	Unoccupied	83.654	3,60%	88,7
	Inactive	1.131.971	49,10%	93
Zone	Urban	2.602.212	89,00%	93,3
	Rural	322.070	11,00%	89,7